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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
Write the name that is on your government-issued picture identification (for example, your driver's		government-issued ure identification (for	Denise First name	First name
		ise or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Perkins Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security Iber or federal vidual Taxpayer Itification number	xxx-xx-8222	

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Debtor 1 Denise Perkins

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	427 W. Frech Streator, IL 61364	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		La Salle County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Denise Perkins

ar	Tell the Court About	Your E	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				of each, see No			342(b) for Individuals F	Filing for Bankruptcy
	choosing to file under	■ Chapter 7 □ Chapter 11							
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	oically, if you are	paying the fe	ee yourself, you m	ay pay with cash, cas	al court for more details shier's check, or money redit card or check with
					tallments. If you		option, sign and a	attach the Application	for Individuals to Pay
			but is not req	uired to, waive	your fee, and ma	ay do so only	if your income is	less than 150% of the	Y. By law, a judge may, a official poverty line that option, you must fill out
								B) and file it with your	
9.	Have you filed for bankruptcy within the	■ N	0.						
	last 8 years?	ПΥ	es.						
			District			When		Case number	
			District			When		Case number	
			District			When		_ Case number	
10.	Are any bankruptcy	■ N	0						
	cases pending or being filed by a spouse who is								
	not filing this case with you, or by a business partner, or by an affiliate?		C 3.						
			Debtor					Relationship to you	
			District			When		Case number, if know	vn
			Debtor					Relationship to you	
			District			When		Case number, if know	vn
11.	Do you rent your	■ N	o. Go to I	ine 12.					
	residence?	ПΥ	es. Has yo	ur landlord obta	ained an evictior	i judgment ag	gainst you and do	you want to stay in yo	our residence?
				No. Go to line	12.				
				Yes. Fill out In bankruptcy per		About an Evic	tion Judgment Ag	ainst You (Form 101A	a) and file it with this

Document Page 4 of 49 Case number (if known) Debtor 1 Denise Perkins Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Denise Perkins Document Page 5 of 49 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi	t
counseling because of:	

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Denise Perkins** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000** □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Denise Perkins Signature of Debtor 2 Denise Perkins Signature of Debtor 1 Executed on Executed on November 14, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Denise Perkins Page 7 01 49

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Marilyn Barton	Date	November 14, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Marilyn Barton		
Printed name		
Marilyn Barton #128-066		
Firm name		
1606 Champlain St.		
Ottawa, IL 61350		
Number, Street, City, State & ZIP Code		
Contact phone (815) 434-1166	Email address	
#128-066		
Bar number & State	-	

		Ducum	THE FAUC O UL 43		
Fill in this infor	mation to identify your	case:			
Debtor 1	Denise Perkins				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Check if this amended fili	

amended filing

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,950.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,950.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	68,188.00
	Your total liabilities	\$	68,188.00
Pai	t 3: Summarize Your Income and Expenses	,	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,316.67
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	661.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a persona	I, family, or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

1,316.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	l claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-36180 Doc 1 Filed 11/14/16 Entered 11/14/16 10:48:56 Desc Main Page 10 of 49 Document Fill in this information to identify your case and this filing: Debtor 1 **Denise Perkins** First Name Middle Name Last Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: Impala Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2008 Debtor 2 only Current value of the Current value of the 119000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another Vehicle is damaged from 2 recent \$2,000.00 \$2,000.00 ☐ Check if this is community property auto accidents (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,000.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

	Case 16-36180	Doc 1	Filed 11/14/16		48:56	Desc Main
Debtor 1	Denise Perkins		Document	Page 11 of 49 Case number	(if known)	
Yes.	Describe					
			ave, stove, refrigerato end table, lamp, kitche	r, washer, dryer, couch, en set, bed, dresser		\$350.00
■ No	es: Televisions and radios including cell phones,			oment; computers, printers, scanner	s; music co	ollections; electronic devices
	Describe					
Example No	bles of value es: Antiques and figurines; other collections, mem Describe			oks, pictures, or other art objects; st	amp, coin,	or baseball card collections;
Example ■ No	ent for sports and hobbies: Sports, photographic, emusical instruments Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis	s; canoes a	and kayaks; carpentry tools;
■ No	ns bles: Pistols, rifles, shotgur Describe	ns, ammunitio	n, and related equipmen	t		
□ No	s oles: Everyday clothes, furs Describe	s, leather coat	s, designer wear, shoes	, accessories		
	Ordina	ry wearing a	pparel			\$50.00
■ No □ Yes.		tume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watche	s, gems, g	old, silver
Examp ■ No	oles: Dogs, cats, birds, hor	ses				
■ No	her personal and housel Give specific information.		u did not already list, i	ncluding any health aids you did	not list	
	he dollar value of all of y art 3. Write that number h			ny entries for pages you have atta	ached	\$400.00
	scribe Your Financial Assets		est in any of the follow	ring?		Current value of the
Do you ow	vn or have any legal or e	quitable lliter	est in any of the follow	mg:		portion you own? Do not deduct secured claims or exemptions.
16. Cash Examp	oles: Money you have in yo	our wallet, in y	our home, in a safe depo	osit box, and on hand when you file	your petitic	on

	Case 16-36180 Doc 1 R	Filed 11/14/16 Enter Document Page 1		esc Main
Debtor 1	Denise Perkins		Case number (if known)	
■ Yes				
			Cash	\$1,500.0
	sits of money nples: Checking, savings, or other financial a institutions. If you have multiple accou			ses, and other similar
		Institution name:		
	17.1. Checking	First State Bank		\$50.00
Exam ■ No	s, mutual funds, or publicly traded stocks apples: Bond funds, investment accounts with	brokerage firms, money market a	accounts	
joint ■ No	oublicly traded stock and interests in incoventure . Give specific information about them Name of entity:		ousinesses, including an interest in % of ownership:	an LLC, partnership, an
Nego Non-i ■ No	rnment and corporate bonds and other ne triable instruments include personal checks, negotiable instruments are those you cannot . Give specific information about them Issuer name:	cashiers' checks, promissory not	es, and money orders.	
	ement or pension accounts nples: Interests in IRA, ERISA, Keogh, 401(k	c), 403(b), thrift savings accounts,	or other pension or profit-sharing plar	ns
	. List each account separately. Type of account:	Institution name:		
Your	rity deposits and prepayments share of all unused deposits you have made apples: Agreements with landlords, prepaid re			or others
		Institution name or indi	vidual:	
23. Annu i ■ No	ities (A contract for a periodic payment of m	oney to you, either for life or for a	number of years)	
☐ Yes	Issuer name and description	1.		
	sts in an education IRA, in an account in a 5.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or u	nder a qualified state tuition progra	m.
☐ Yes	Institution name and descrip	otion. Separately file the records of	of any interests.11 U.S.C. § 521(c):	
■ No	s, equitable or future interests in property . Give specific information about them	(other than anything listed in	line 1), and rights or powers exercis	able for your benefit
	·	and other intellectual was		
	ts, copyrights, trademarks, trade secrets apples: Internet domain names, websites, productions			

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill \square$ Yes. Give specific information about them...

■ No

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De	ebtor 1	Denise Perkins		Bocament	Case number (if known)	
27.	Examp ■ No	es, franchises, and other goles: Building permits, exclusions Give specific information ab	ve licenses		n holdings, liquor licenses, professional licens	es
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	funds owed to you Give specific information about	out them, inc	cluding whether you alre	ady filed the returns and the tax years	
29.	Examp	support oles: Past due or lump sum a Give specific information	,	usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
30.	Examp	amounts someone owes your contest Unpaid wages, disability benefits; unpaid loans your Give specific information	insurance		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
31.	Examp ■ No	Name the insurance compan	y of each p		HSA); credit, homeowner's, or renter's insurar	
		Сотра	any name:		Beneficiary:	Surrender or refund value:
32.	If you a someo	terest in property that is duare the beneficiary of a living one has died. Give specific information			ed surance policy, or are currently entitled to rec	eive property because
33.	Examp ☐ No	against third parties, whet oles: Accidents, employment Describe each claim			it or made a demand for payment to sue	
			24, 201	16 and a second pers	to accident which occurred on August onal injury claim from auto accident	Hakaaya
	■ No □ Yes. Any fin	Describe each claim ancial assets you did not a	d claims of	every nature, includin	g counterclaims of the debtor and rights to	set off claims
36		he dollar value of all of you art 4. Write that number her		,	ny entries for pages you have attached	\$1,550.00
Pa	rt 5: Dec	scribe Any Rusiness-Related P	ronerty You	Own or Have an Interest I	n. List any real estate in Part 1.	

Official Form 106A/B Schedule A/B: Property page 4

Case 16-36180 Doc 1 Filed 11/14/16 Entered 11/14/16 10:48:56 Desc Main Document Page 14 of 49 Case number (if known) Debtor 1 **Denise Perkins** 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$2,000.00 57. Part 3: Total personal and household items, line 15 \$400.00 Part 4: Total financial assets, line 36 58. \$1,550.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$3,950.00 Copy personal property total \$3,950.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$3,950.00

		Docume	IIL I UUC IJ UI IJ	
Fill in this infor	mation to identify your	case:		
Debtor 1	Denise Perkins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amended filir

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption.
2008 Chevrolet Impala 119000 miles Vehicle is damaged from 2 recent auto accidents Line from <i>Schedule A/B</i> : 3.1	\$2,000.00	\$2,000.00 735 ILCS 5/12-1001(c) 100% of fair market value, up to any applicable statutory limit
Television, microwave, stove, refrigerator, washer, dryer, couch, loveseat, recliner, end table, lamp, kitchen set, bed, dresser Line from <i>Schedule A/B</i> : 6.1	\$350.00	\$350.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
Ordinary wearing apparel Line from <i>Schedule A/B</i> : 11.1	\$50.00	\$50.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
Cash Line from <i>Schedule A/B</i> : 16.1	\$1,500.00	\$1,500.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit
Checking: First State Bank Line from <i>Schedule A/B</i> : 17.1	\$50.00	\$50.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit

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Debtor 1 Denise Perkins Case number (if known)

	DOTINO I OTATIO					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption		
	One Personal injury from auto accident which occurred on August 24, 2016 and a second personal injury claim from auto accident which occurred on October 13, 2016 Line from Schedule A/B: 33.1	Unknown	□ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(h)(4)		
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	B years after that for car	ses filed on or after the date of adjustmer	,		

Fill in this infor	rmation to identify your	case:		
Debtor 1	Denise Perkins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

J	430 10 00100 1	Document	Page	18 of 49	Best Main
Fill in this info	rmation to identify your				
Debtor 1	Denise Perkins				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	NORTHERN DISTRICT OF I	ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Off: -: -! = - =	400E/E				
Official For		7 - 11 11			4045
		ho Have Unsecure			12/15 RIORITY claims. List the other party to
Schedule G: Exec Schedule D: Cred eft. Attach the Co name and case n	cutory Contracts and Unexp litors Who Have Claims Sec ontinuation Page to this pag umber (if known).	ired Leases (Official Form 106G) ured by Property. If more space i e. If you have no information to i	. Do not includ is needed, cop	de any creditors with partially sec by the Part you need, fill it out, nu	operty (Official Form 106A/B) and on cured claims that are listed in umber the entries in the boxes on the o of any additional pages, write your
	All of Your PRIORITY Un				
	itors have priority unsecure	d claims against you?			
No. Go to	Part 2.				
☐ Yes.					
Part 2: List	All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any cred	itors have nonpriority unsec	cured claims against you?			
☐ No. You h	nave nothing to report in this p	art. Submit this form to the court wi	ith your other so	chedules.	
Yes.					
				who holds each claim. If a creditor	has more than one nonpriority ms already included in Part 1. If more
					ims fill out the Continuation Page of
Part 2.					Total claim
4.1 Chami	oion Fitness	Last 4 digits of a	ccount numbe	ar	\$2,000.00
	rity Creditor's Name		coount numbe		Ψ2,000.00
	Starfire Drive	When was the de	bt incurred?	2016	
	a, IL 61350 Street City State Zlp Code	As of the date yo	u file the clair	m is: Check all that apply	
	curred the debt? Check one.	As of the date yo	u ille, tile ciali	ii is. Oneck all that apply	
	or 1 only	☐ Contingent			
_	or 2 only	■ Unliquidated			
	or 1 and Debtor 2 only	☐ Disputed			
	ast one of the debtors and and		ORITY unsecu	red claim:	
	ck if this claim is for a com	Па			
debt		☐ Obligations aris		eparation agreement or divorce that	t you did not
	aim subject to offset?	report as priority c			
■ No		☐ Debts to pension	on or profit-sha	ring plans, and other similar debts	
☐ Yes		Other. Specify	Therapy		

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Deptor	1 Denise Perkins	Case number (if know)					
4.2	Champion Physical Therapy Nonpriority Creditor's Name	Last 4 digits of account number	Unknown				
	119 S. Sterling Streator, IL 61364	When was the debt incurred? 2016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	■ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Medical services					
4.3	Davell D. Sewell	Last 4 digits of account number	Unknown				
	Nonpriority Creditor's Name 8232 S. Troop Chicago, IL 60612	When was the debt incurred? August, 2016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Passenger in other vehicle in auto accident					
4.4	Dionte Graham Nonpriority Creditor's Name	Last 4 digits of account number	Unknown				
	13312 S. Corliss Chicago, IL 60612	When was the debt incurred? August, 2016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	■ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Passenger in other vehicle in auto accident					

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Case number (if know)

Dr. U. Sinha	Last 4 digits of account number	\$20,000.00
Nonpriority Creditor's Name 501 Oakley Ave. Streator, IL 61364	When was the debt incurred? 2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical services	
Jamaal A. Burris	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 13221 S. Olde Western Ave., Apt. 3	When was the debt incurred? August, 2016	
Blue Island, IL 60406 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
Michael L. Pitts	Last 4 digits of account number	Unknown
Nonpriority Creditor's Name 10312 S. Corliss	When was the debt incurred? August, 2016	
Chicago, IL 60612 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
■ Debtor 1 only		
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Passenger in other vehicle involved in auto accident;	

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Debto	or 1 Denise Perkins	Case number (if know)	
4.8	Numark Credit Union	Last 4 digits of account number	\$12,038.00
	Nonpriority Creditor's Name P. O. Box 2729 Joliet, IL 60434	When was the debt incurred? 2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	□ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Cosigner on loan for vehicle	
4.9	OSF Medical Group	Last 4 digits of account number	\$18,500.00
	Nonpriority Creditor's Name 111 E. Spring St. Streator, IL 61364	When was the debt incurred? 2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical services	
4.1	Paul G. Frazier		Unknown
)	Nonpriority Creditor's Name	Last 4 digits of account number	Ulknown
	410 W. Henry St. Pontiac, IL 61764	When was the debt incurred? October, 2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Driver of other vehicle in auto accident	

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Debt	or 1 Denise Perkins	Case number (if know)	
4.1 1	Perry Memorial Hospital	Last 4 digits of account number	\$2,200.00
	Nonpriority Creditor's Name 530 Park Ave. East Princeton, IL 61356	When was the debt incurred? 2015	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Hospital services	
4.1	Robert Lacour	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	439 Muskegon	When was the debt incurred? 2016	
	Calumet City, IL 60409 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or the date you may the stain to: Oncor all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Cosigner on loan for vehicle with Numark Credit Union	
4.1	St. Margaret's Clinic	Last 4 digits of account number	\$2,000.00
3	Nonpriority Creditor's Name		Ψ=,σσσ.σσ
	P. O. Box 189	When was the debt incurred? 2016	
	Spring Valley, IL 61362 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damin is. Officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify Medical services	
		opoon,	

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Debto	r 1 Denise Perkins	Case number (if know)	
4.1 4.1	St. Mary's Hospital Nonpriority Creditor's Name P. O. Box 27611 Salt Lake City, UT 84127 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical expenses	\$2,000.00
4.1	Starfire Dental Clinic Nonpriority Creditor's Name Dr. Mitchell Myers 1300 Starfire Drive Ottawa, IL 61350 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Dental services	\$1,100.00
4.1	Streator Onized Credit Union Visa Nonpriority Creditor's Name P. O. Box 4521 Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Last 4 digits of account number 7555 When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Consumer goods	\$2,700.00

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Case number (if know) Document

Debtor 1	Denise Pe	erkins		Case n	number (if	know)	
4.1 .	Torget Card	Comico		0242			¢= 6=0.00
	Target Card Nonpriority Cred		Last 4 digits of account number	8342		-	\$5,650.00
	P. O. Box 66	60170	When was the debt incurred?	2016			-
	Dallas, TX 7 Number Street	5266 City State Zlp Code	As of the date you file, the claim	is: Check	call that an	vla	
		the debt? Check one.	,	01.001	t all triat ap	P-)	
	■ Debtor 1 onl	lv	☐ Contingent				
	☐ Debtor 2 onl	•	Unliquidated				
	Debtor 1 and	•	☐ Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		s claim is for a community	☐ Student loans				
	debt		☐ Obligations arising out of a sepa	aration ag	reement o	r divorce that you did not	
	_	bject to offset?	report as priority claims				
	No		Debts to pension or profit-sharing				
	☐ Yes		Other. Specify Clothes, for	od, cons	sumer go	oods	-
4.1 ,	Vissering Co	onstruction Co.	Last 4 digits of account number				Unknown
~ I	Nonpriority Cred		Last 4 digits of account number			-	
		nark Industrial Drive	When was the debt incurred?	2016			_
		City State ZIp Code the debt? Check one.	As of the date you file, the claim	is: Check	call that ap	pply	
	Debtor 1 on	ly	☐ Contingent				
	☐ Debtor 2 onl	ly	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if thi	s claim is for a community	☐ Student loans				
	debt		☐ Obligations arising out of a sepa	aration ag	reement o	r divorce that you did not	
	_	bject to offset?	report as priority claims				
	No		☐ Debts to pension or profit-sharin				
	☐ Yes		Other. Specify truck driven	by an	employe	sering Construction e	_
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
is tryin have m	g to collect fro nore than one o	m you for a debt you owe to som	out your bankruptcy, for a debt that eone else, list the original creditor in ou listed in Parts 1 or 2, list the add submit this page.	n Parts 1	or 2, then	list the collection agenc	y here. Similarly, if you
Part 4:	Add the A	mounts for Each Type of Uns	ecured Claim				
	he amounts of unsecured cla		s. This information is for statistical i	eporting	purposes	only. 28 U.S.C. §159. Ad	d the amounts for each
						Total Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
	otal ims						
from Pa		Taxes and certain other debts y	ou owe the government	6b.	\$	0.00	<u>I</u>
	6c.	Claims for death or personal in		6c.	\$	0.00	_
	6d.	Other. Add all other priority unser	cured claims. Write that amount here.	6d.	\$	0.00	_
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00	
	6f.	Student loans		6f.	\$	Total Claim 0.00	
	otal					3.00	=
clai from Pa	ims irt 2 6g.	Obligations arising out of a ser	paration agreement or divorce that				
		you did not report as priority cl	aims	6g.	\$ \$	0.00	_
	6h.	pents to bension of broug-shar	ing plans, and other similar debts	6h.	Φ		_

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Debtor 1 Denise Perkins

			0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 68,188.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 68,188.00

Fill in this infor	rmation to identify your	case:		
Debtor 1	Denise Perkins			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				
					_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
					_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				<u>—</u>
	Number	Street			_
		0001			
	City		State	ZIP Code	_
	•				

		Docume	ent Page 27 d	of 49	
Fill in this	s information to identify your	case:			
Dahtand	D : D !:				
Debtor 1	Denise Perkins First Name	Middle Name	Last Name		
Debtor 2	i iist ivaine	Wildele Name	Last Name		
(Spouse if, fil	ling) First Name	Middle Name	Last Name		
(-1 ,	3,				
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
•					
Case num	nber				☐ Check if this is an
(II KIIOWII)					☐ Check if this is an amended filing
					amended ming
Officia	al Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
your name	e and case number (if known). Answer every question			of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Ye	s				
	thin the last 8 years, have you				tates and territories include
Arizoi	na, California, Idaho, Louisiana	, Nevada, New Mexico, Pu	ierto Rico, Lexas, vvasn	ington, and vvisconsin.)	
■ No	. Go to line 3.				
⊔ Ye	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only 106D), Schedule E/F (Officia	if that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
out C	Column 2.				
	Column 1: Your codebtor			Column 2: The credi	tor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules	
				_	
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	e
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
3.2	Nome			Schedule D, line	
	Name			☐ Schedule E/F, line	·
				☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:							
	otor 1 Denise Perk								
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number nown)						ent showing p		chapter
O.	fficial Form 106I						as of the follo	wing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s th you, do not includ	spouse i de infori	is living wi mation abo	th you, included the second the s	ude informat use. If more	ion about space is i	your needed,
1.	Fill in your employment information.	yment				Debtor 2 or non-filing spouse			
	If you have more than one job,	Employees and adoption	☐ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed			☐ Not e	mployed		
		Occupation				<u> </u>			
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed th	nere?						
Par	t 2: Give Details About Mo	nthly Income							
spou If yo	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have mee space, attach a separate sheet to	ore than one employer, co	-		•			·	-
					For D	Debtor 1	For Debto non-filing		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly over	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	0.00	\$	N/A_	

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Debt	or 1	Denise Perkins	_	Case number (if known)				
				Fo	r Debtor 1		Debtor 2 or filing spouse	
	Сор	y line 4 here	4.	\$_	0.00	\$	N/A	
5.	List	all payroll deductions:						
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$-	0.00	\$-	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$_	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+			+ \$	N/A	
6		• • ———————————————————————————————————	_	* - \$		\$		
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. culate total monthly take-home pay. Subtract line 6 from line 4.	6. 7.	» - \$	0.00	\$	N/A	
7.			7.	Φ_	0.00	Φ	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			2.00			
	O.L	monthly net income.	8a.	\$_	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Workers compensation settlement	8h.+	\$_	1,316.67	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,316.67	\$	N/A	
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$		1,316.67 + \$		N/A = \$ 1,3	16.67
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,010.07		1471	710.07
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certalies					Combined	316.67
13.	Do y	you expect an increase or decrease within the year after you file this form No.	1?				monthly inc	ome
	_	Yes. Explain: Debtor has applied for Social Security Disability						

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Fill	n this informa	ation to identify y	our case:			1		
Debt		Denise Perki				Ch	eck if this is:	
		Defiliate Ferri	110				An amended filin	•
Debt (Spc	tor 2 ouse, if filing)							nowing postpetition chapter of the following date:
Unite	ed States Bankı	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	,
	e numbe r	, ,						
	nown)							
Of	ficial Fo	rm 106J				•		
		J: Your	Exper	nses				12/1
Be a	as complete rmation. If m	and accurate as	s possible eded, atta	. If two married people ar				
Part		ribe Your House	ehold					
1.	Is this a join No. Go to							
			in a separ	ate household?				
	□N	lo						
	ПΥ	es. Debtor 2 mu	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	ebtor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						_ □ Yes □ No
								☐ Yes
								□ No □ Yes
								_ □ res □ No
								Yes
3.		penses include of people other t	han _	No				
		d your depende		Yes				
		nate Your Ongoi						
exp	mate your ex enses as of a licable date.	a date after the	our bankr bankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this f lemental <i>Schedule</i>	orm as a s e J, check	supplement in a C the box at the top	hapter 13 case to report of the form and fill in the
Incl	ude expense	es paid for with	non-cash	government assistance i	f you know			
	value of suclicial Form 10		d have inc	cluded it on Schedule I: Y	our Income		Your ex	rpenses
•		•						
4.		or home owners nd any rent for the		ises for your residence. In or lot.	nclude first mortgag	e 4.	\$	0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	•	erty, homeowner'				4b.	·	0.00
		e maintenance, re eowner's associa		upkeep expenses		4c. 4d.	·	0.00
5.				our residence, such as ho	me equity loans	4u. 5.	· -	0.00

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Denise Perkins	Case num	ber (if known)	
lition:			
	62	\$	200.00
		*	45.00
		·	
		•	45.00
· · ·			0.00
		·	194.00
		·	0.00
othing, laundry, and dry cleaning	9.	\$	0.00
rsonal care products and services	10.	\$	50.00
dical and dental expenses	11.	\$	25.00
ansportation. Include gas, maintenance, bus or train fare.			
not include car payments.		\$	40.00
tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
aritable contributions and religious donations	14.	\$	0.00
urance.			
	15a.	\$	0.00
o. Health insurance	15b.	\$	0.00
c. Vehicle insurance		*	62.00
			0.00
· · ·		Ψ	0.00
	16	¢	0.00
• • • • • • • • • • • • • • • • • • • •		Ψ	0.00
	170	¢	0.00
		·	0.00
			0.00
		·	0.00
	17d.	\$	0.00
	40	•	0.00
	18.		
		\$	0.00
·			
a. Mortgages on other property	20a.	\$	0.00
o. Real estate taxes	20b.	\$	0.00
c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e.	\$	0.00
par: Specify:		·	0.00
		ΙΨ	0.00
Iculate your monthly expenses			
a. Add lines 4 through 21.		\$	661.00
S .		\$	
		·	661.00
s. Add into 22d and 22D. The result is your monthly expenses.		Ψ	661.00
Iculate your monthly net income.			
	23a.	\$	1,316.67
		·	661.00
T	_00.		001.00
Subtract your monthly expenses from your monthly income			
The result is your <i>monthly net income</i> .	23c.	\$	655.67
THE TESUIL IS YOUR MONITHY HELINCOME.		·	
you expect an increase or decrease in your expenses within the year after you	ı file this	form?	
you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your r			or decrease because of a
			or decrease because of a
example, do you expect to finish paying for your car loan within the year or do you expect your r			or decrease because of a
i	illities: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies illideare and children's education costs othing, laundry, and dry cleaning prisonal care products and services edical and dental expenses an apportation. Include gas, maintenance, bus or train fare. In not include car payments. Itertainment, clubs, recreation, newspapers, magazines, and books maritable contributions and religious donations surance. In other insurance deducted from your pay or included in lines 4 or 20. Life insurance Wehicle insurance. Specify: xes. Do not include taxes deducted from your pay or included in lines 4 or 20. tecify: stallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 2 c. Other. Specify: tur payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). her payments you make to support others who do not live with you. secify: her real property expenses not included in lines 4 or 5 of this form or on Scheda. Mortgages on other property b. Real estate taxes c. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses e. Homeowner's association or condominium dues her: Specify: cliculate your monthly expenses a. Add lines 4 through 21. b. Copy line 12 (your combined monthly income) from Schedule I. b. Copy june 12 (your combined monthly income) from Schedule I. b. Copy your monthly expenses from line 22c above. c. Subtract your monthly expenses from your monthly income.	ilities: Electricity, heat, natural gas Electricity, and housekeeping supplies Electricity, and ry cleaning Electricity, electricity, and devices Into include and housekeeping supplies Into thing, laundry, and dry cleaning By arsonal care products and services Into include car payments. Into include gas, maintenance, bus or train fare. Into include car payments. Into include insurance, newspapers, magazines, and books Into include insurance deducted from your pay or included in lines 4 or 20. Into include insurance deducted from your pay or included in lines 4 or 20. Electricity, later and lines and lines 4 or 20. Electricity, later and lines and lines 4 or 20. Electricity, later and lines and l	ilitiles: Electricity, heat, natural gas Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Cother, Specity: Od and housekeeping supplies ilidicare and children's education costs 8. \$ othing, laundry, and dry cleaning sonal care products and services tothing, laundry, and dry cleaning sonal care products and services ansportation. Include gas, maintenance, bus or train fare. not include car payments. 11. \$ anaritable contributions and religious donations surance. 12. \$ not include car payments. 13. \$ aritable contributions and religious donations surance. 14. \$ surance. 15. \$ C. Vehicle insurance deducted from your pay or included in lines 4 or 20. a. Life insurance 15. \$ C. Vehicle insurance 15. \$ C. Vehicle insurance. \$ 15. \$ C. Vehicle insurance. \$ C. Vehicle insura

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Fill in this infor	mation to identify your	case:			
Debtor 1	Denise Perkins				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Daa				
Official For					
Declara	tion About a	ın Individua	l Debtor's S	Schedules	12/15
		r, both are equally respo			
obtaining mone	y or property by fraud i	n connection with a ban			ement, concealing property, or 00, or imprisonment for up to 20
ears, or both. 1	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill o	out bankruptcy forms?	
■ No					
□ Yes.	Name of person			Attach Banl	kruptcy Petition Preparer's Notice,
					, and Signature (Official Form 119)
		that I have read the sur	nmary and schedules	filed with this declaration	on and
that they ar	re true and correct.				
	nise Perkins		x		
	e Perkins		Signatur	e of Debtor 2	
Signatu	ire of Debtor 1				
Date	November 14, 2016		Date		

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Fill	in this inform	nation to identify your	case:						
Del	otor 1	Denise Perkins							
		First Name	Middle Name	Last Name					
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS					
Cas	se number								
_	nown)				_	theck if this is an mended filing			
						menaea ming			
∩f	ficial Fo	rm 107							
			Affairs for Individ	duals Filing for B	ankruptcy	4/16			
					equally responsible for sup				
info	rmation. If m		attach a separate sheet to		additional pages, write you				
	<u> </u>								
Par			rital Status and Where You	Lived Before					
1.	What is your	current marital statu	s?						
	☐ Married■ Not mar	ried							
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?					
	■ No								
	■ No □ Yes. Lis	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3.					ity property state or territory				
state	es and territori	es include Arizona, Cal	ifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	/isconsin.)			
	■ No								
	☐ Yes. Ma	ke sure you fill out Sch	edule H: Your Codebtors (Of	ficial Form 106H).					
Par	t 2 Explai	n the Sources of You	r Income						
4.	Fill in the tota	l amount of income you	received from all jobs and a	g a business during this ye all businesses, including part- e together, list it only once un		ndar years?			
	□ No								
		in the details.							
			Debtor 1		Debtor 2				
			Sources of income	Gross income	Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
	r last calenda nuary 1 to De	r year: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$5,499.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

Case 16-36180 Doc 1 Filed 11/14/16 Entered 11/14/16 10:48:56 Desc Main Page 34 of 49 Document Debtor 1 Denise Perkins Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$32,044.00 ☐ Wages, commissions, ■ Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until Workers compensation \$7,900.00 the date you filed for bankruptcy: settlement For last calendar year: Retirement Income \$39,354.00 (January 1 to December 31, 2015) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- - Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

- * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
- Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment Total amount Amount you Was this payment for ... paid still owe

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Case number (if known) Document Debtor 1 Denise Perkins

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No									
	Yes. List all payments to an insider.									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer	any property on a	ccount of a d	ebt that benefited an				
	■ No □ Yes. List all payments to an insider									
	,.,	Dates of navment	Total amount	Amount you	Bassan for	this novement				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include cred	this payment litor's name				
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures								
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency	,	Status of the	ne case				
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed,	foreclosed, garnis	hed, attache	d, seized, or levied?				
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property				
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institution	, set off any	amounts from your				
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount				
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	sion of an assigne	e for the ben	efit of creditors, a				
Pai	t 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?				
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value				
	Person to Whom You Gave the Gift and Address:									

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Case number (if known) Document

14.	Within 2 years before you filed for bankro ■ No □ Yes. Fill in the details for each gift or c			ns with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed		Dates you contributed	Value
Pa	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	it, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and	Descril	be any insurance coverage for the lo	oss	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. Loce claims on line 33 of Schedule A/B:		loss	losi
Pa	rt 7: List Certain Payments or Transfers	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition placed No Yes, Fill in the details.	oreparin	ng a bankruptcy petition?			rty to anyone you
	Person Who Was Paid		Description and value of any prop	ortu	Data navment	Amount
	Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any property transferred		erty	Date payment or transfer was made	Amount of payment
	Marilyn Barton #128-066 1606 Champlain St. Ottawa, IL 61350		Attorney Fees and courts costs		10/17/16	\$1,035.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that No Yes. Fill in the details.	ditors or	to make payments to your creditor		r transfer any prope	rty to anyone who
	Person Who Was Paid		Description and value of any prop	ortv	Data navment	Amount of
	Address		transferred	erty	Date payment or transfer was made	payment
18.	Within 2 years before you filed for bankry transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alre-	i r busin e made a	ess or financial affairs? as security (such as the granting of a se			
	No					
	Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you				3	

Debtor 1 Denise Perkins

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Case number (if known)

Denise Perkins Debtor 1

19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No □ Yes. Fill in the details.		y property to a	self-settle	d trust or similar device	of which you are a	
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made	
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and St	orage Unit	s		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated as the same of th	other financial accour	nts; certificates	of deposit			
	■ No □ Yes. Fill in the details.						
		ast 4 digits of account number	Type of accountstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, ar	ny safe dep	oosit box or other depos	itory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control fo	r Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any propert	ty you borr	rowed from, are storing t	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Value	
Par	tt 10: Give Details About Environmental Inform	mation					
or	the purpose of Part 10, the following definition	s apply:					
	For the control of th		.1-41			(

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Denise Perkins

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t 11: Give Details About Your Business or Con	nections to Any Business				
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	No. None of the above applies. Go to Part 12.					
	"",					
	Address	scribe the nature of the business	Employer Identification number Do not include Social Security r			
	(Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Dates business existed			
28.	Within 2 years before you filed for bankruptcy, or institutions, creditors, or other parties.	did you give a financial statement t	o anyone about your business? Inclu	de all financial		
	■ No					
	☐ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	te Issued				

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Debtor 1 Denise Perkins Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Denise Perkins Denise Perkins Signature of Debtor 2 Signature of Debtor 1 Date November 14, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No

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				_
Fill in this inform	ation to identify your	case:		
Debtor 1	Denise Perkins			
5.4.	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				_ 0, , , , , ,
(if known)				☐ Check if this is an amended filing
Official For	m 108			
Statemen	t of Intentio	n for Indiv	riduals Filing Under Chapt	ter 7 12/15
you have lease You must file this whichev on the fo If two married pec sign and Be as complete as write yo	ver is earlier, unless the form ople are filing togethe d date the form.	ind the lease has no rithin 30 days after the court extends the rin a joint case, both le. If more space is nber (if known).	ot expired. you file your bankruptcy petition or by the date e time for cause. You must also send copies to the th are equally responsible for supplying correct s needed, attach a separate sheet to this form. O	the creditors and lessors you list information. Both debtors must
1. For any credito information bel		art 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
Identify the cree	ditor and the property t	hat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	□Yes
Description of			☐ Retain the property and enter into a Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:				

Official Form 108

Creditor's

Description of

securing debt:

Description of

securing debt:

name:

property

Creditor's

name:

property

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

☐ Surrender the property.

☐ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

□ No

☐ Yes

□ No

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Debtor 1 Denise Perkins	Case number (if known	n)
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
n the information below. Do not list rea	I Property Leases ase that you listed in Schedule G: Executory Contracts and Unexpir I estate leases. Unexpired leases are leases that are still in effect; t I property lease if the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your unexpired personal prop	perty leases	Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased Property:		□ No
Lessor's name: Description of leased		□ No
Property: Part 3: Sign Below		☐ Yes
	have indicated my intention about any property of my estate that s lease.	ecures a debt and any personal
X /s/ Denise Perkins Denise Perkins Signature of Debtor 1	X Signature of Debtor 2	
Date November 14, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-36180 Doc 1 Filed 11/14/16 Entered 11/14/16 10:48:56 Desc Main Document Page 46 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	e Denise Perkins		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF CO	MPENSATION OF ATTOR	RNEY FOR DI	EBTOR(S)		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. I compensation paid to me within one year before be rendered on behalf of the debtor(s) in contemp	the filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rend	lered or to	
	For legal services, I have agreed to accept		\$	700.00		
	Prior to the filing of this statement I have re-	ceived	\$	700.00		
	Balance Due			0.00		
2. ′	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3. ′	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclose	ed compensation with any other person	unless they are mem	bers and associates of n	ny law firm.	
	☐ I have agreed to share the above-disclosed cocopy of the agreement, together with a list of				firm. A	
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
1	 a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedule c. Representation of the debtor at the meeting of d. [Other provisions as needed] Negotiations with secured creditors agreements and applications as needed of liens on household goods. 	les, statement of affairs and plan which f creditors and confirmation hearing, an to reduce to market value; exemptic	may be required; d any adjourned hea on planning; prepal	rings thereof;	ffirmation	
6.	By agreement with the debtor(s), the above-disclender Representation of the debtors in any adversary proceeding.			of from stay actions or	r any other	
		CERTIFICATION				
	I certify that the foregoing is a complete statement cankruptcy proceeding.	nt of any agreement or arrangement for	payment to me for r	epresentation of the deb	otor(s) in	
N	November 14, 2016	/s/ Marilyn Barton				
\overline{D}	Date	Marilyn Barton #12				
		Signature of Attorne Marilyn Barton #12				
		1606 Champlain S				
		Ottawa, IL 61350				
		(815) 434-1166 Name of law firm			_	
		ıvame oj iaw jirm				

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United States Bankruptcy CourtNorthern District of Illinois

		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		
In re	Denise Perkins		Case No.	
		Debtor(s)	Chapter 7	
	V/E	ERIFICATION OF CREDITOR I	M A TDIV	
	V E	EXITICATION OF CREDITOR I	MAINIA	
		Number o	of Creditors:	18
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of cred	litors is true and correct to	the best of my
Date:	November 14, 2016	/s/ Denise Perkins Denise Perkins		

Champion Fitness 1309 Starfire Drive Ottawa, IL 61350

Champion Physical Therapy 119 S. Sterling Streator, IL 61364

Davell D. Sewell 8232 S. Troop Chicago, IL 60612

Dionte Graham 13312 S. Corliss Chicago, IL 60612

Dr. U. Sinha 501 Oakley Ave. Streator, IL 61364

Jamaal A. Burris 13221 S. Olde Western Ave., Apt. 3 Blue Island, IL 60406

Michael L. Pitts 10312 S. Corliss Chicago, IL 60612

Numark Credit Union P. O. Box 2729 Joliet, IL 60434

OSF Medical Group 111 E. Spring St. Streator, IL 61364

Paul G. Frazier 410 W. Henry St. Pontiac, IL 61764

Perry Memorial Hospital 530 Park Ave. East Princeton, IL 61356 Robert Lacour 439 Muskegon Calumet City, IL 60409

St. Margaret's Clinic P. O. Box 189 Spring Valley, IL 61362

St. Mary's Hospital P. O. Box 27611 Salt Lake City, UT 84127

Starfire Dental Clinic Dr. Mitchell Myers 1300 Starfire Drive Ottawa, IL 61350

Streator Onized Credit Union Visa P. O. Box 4521 Carol Stream, IL 60197

Target Card Service P. O. Box 660170 Dallas, TX 75266

Vissering Construction Co. 175 Benchmark Industrial Drive Streator, IL 61364